

## APPLICATION DATA SHEET

| Applicant Information                   |                     |
|-----------------------------------------|---------------------|
| Applicant Authority Type::              | Inventor            |
| Primary Citizenship Country::           | US                  |
| Status::                                | Full Capacity       |
| Given Name::                            | C.                  |
| Middle Name::                           | Frank               |
| Family Name::                           | Bennett             |
| Name Suffix::                           |                     |
| City of Residence::                     | Carlsbad            |
| State or Province of Residence::        | California          |
| Country of Residence::                  | USA                 |
| Street of Mailing Address::             | 1347 Cassins Street |
| City of Mailing Address::               | Carlsbad            |
| State or Province of Mailing Address::  | California          |
| Country of Mailing Address::            | USA                 |
| Postal or Zip Code of Mailing Address:: | 92009               |

| Applicant Information                   |                         |
|-----------------------------------------|-------------------------|
| Applicant Authority Type::              | Inventor                |
| Primary Citizenship Country::           | UK                      |
| Status::                                | Full Capacity           |
| Given Name::                            | Kenneth                 |
| Middle Name::                           | W.                      |
| Family Name::                           | Dobie                   |
| Name Suffix::                           |                         |
| City of Residence::                     | Del Mar                 |
| State or Province of Residence::        | California              |
| Country of Residence::                  | USA                     |
| Street of Mailing Address::             | 703 Stratford Court, #4 |
| City of Mailing Address::               | Del Mar                 |
| State or Province of Mailing Address::  | California              |
| Country of Mailing Address::            | USA                     |
| Postal or Zip Code of Mailing Address:: | 92014                   |

| Applicant Information                   |                         |
|-----------------------------------------|-------------------------|
| Applicant Authority Type::              | Inventor                |
| Primary Citizenship Country::           | US                      |
| Status::                                | Full Capacity           |
| Given Name::                            | Eric                    |
| Middle Name::                           | G.                      |
| Family Name::                           | Marcusson               |
| Name Suffix::                           |                         |
| City of Residence::                     | San Diego               |
| State or Province of Residence::        | California              |
| Country of Residence::                  | USA                     |
| Street of Mailing Address::             | 6369 Caminito de Pastel |
| City of Mailing Address::               | San Diego               |
| State or Province of Mailing Address::  | California              |
| Country of Mailing Address::            | USA                     |
| Postal or Zip Code of Mailing Address:: | 92111                   |

| Correspondence Information              |                                        |
|-----------------------------------------|----------------------------------------|
| Correspondence Customer Number::        | 36441                                  |
| Name::                                  | Howson and Howson                      |
| Street of Mailing Address               | Spring House Corporate Center, Box 457 |
| City of Mailing Address                 | Spring House                           |
| State or Province of Mailing Address    | Pennsylvania                           |
| Country of Mailing Address              | US                                     |
| Postal or Zip Code of Mailing Address:: | 19477                                  |
| Phone Number::                          | 215-540-9200                           |
| Fax Number::                            | 215-540-5818                           |
| E-Mail Address::                        | mebak@howsonandhowson.com              |

| Application Information               |                                                                                  |
|---------------------------------------|----------------------------------------------------------------------------------|
| Application Number::                  |                                                                                  |
| Filing Date::                         | Herewith                                                                         |
| Application Type::                    | Regular                                                                          |
| Subject Matter::                      | Utility                                                                          |
| Suggested Classification::            |                                                                                  |
| Suggested Group Art Unit::            |                                                                                  |
| CD-ROM or CD-R::                      | None                                                                             |
| Number of CD disks::                  |                                                                                  |
| Number of Copies of CDs::             |                                                                                  |
| Sequence Submission?::                | Yes                                                                              |
| Computer Readable Form (CRF)?::       | Yes                                                                              |
| Number of Copies of CRF::             | 1                                                                                |
| Title::                               | ANTISENSE MODULATION OF<br>EXTRACELLULAR-SIGNAL-REGULATED<br>KINASE-6 EXPRESSION |
| Attorney Docket Number::              | PTS-0055USA                                                                      |
| Request for Early Publication?        | No                                                                               |
| Request for Non-Publication?          | No                                                                               |
| Suggested Drawing Figure::            |                                                                                  |
| Total Drawing Sheets::                | 0                                                                                |
| Small Entity::                        | No                                                                               |
| Latin name::                          |                                                                                  |
| Variety denomination name             |                                                                                  |
| Petition Included::                   | No                                                                               |
| Licensed US Govt. Agency::            |                                                                                  |
| Contract or Grant Number::            |                                                                                  |
| Secrecy Order in Parent Application:: |                                                                                  |

| Representative Information           |                     |      |
|--------------------------------------|---------------------|------|
| Representative Customer<br>No. 36441 | Registration Number | Name |

| Domestic Priority Information |                            |                    |                    |
|-------------------------------|----------------------------|--------------------|--------------------|
| Application                   | Continuity Type            | Parent Application | Parent Filing Date |
| This Application              | National Stage of          | PCT/US03/16214     | 06/16/03           |
| PCT/US03/16214                | Continuation-in-part<br>of | 10/348,431         | 01/17/03           |
| PCT/US03/16214                | Continuation-in-part<br>of | 10/174,465         | 06/17/02           |
| 10/348,431                    | Continuation-in-part<br>of | 10/174,465         | 06/17/02           |

| Assignee Information                    |                            |
|-----------------------------------------|----------------------------|
| Assignee Name::                         | ISIS Pharmaceuticals, Inc. |
| Street of Mailing Address::             | 2292 Faraday Avenue        |
| City of Mailing Address::               | Carlsbad                   |
| State or Province of Mailing Address::  | California                 |
| Country of Mailing Address::            | USA                        |
| Postal or Zip Code of Mailing Address:: | 92008                      |